State of California—Environmental Protection Agency	-
Form Approved OMB No. 2050-0039 (Expires 9-30-99)	
Please print or type. Form designed for use on elite (12-pitch) types	vriier.

See Instructions on back of page 6.

SFUND RECORDS CTR

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1	3. Generator's Name and Mailing Address	<u></u>	0 - 1 - 1 - 1 - 1			A Stain A	Nanifest Document N	lumbac	··-	
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1	4. Generator's Phone ()			,			1 1 1 1 1	1. 1 1		
į	5. Transporter 1 Company Name		6. US EPA ID Number			C. State T	ransporter's ID [Rese	erved.]		
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1	7. Transporter 2 Company Name		B. US EPA ID Number			E. State Tr	ansporter's ID [<u>Rese</u>	rved.]	and the second of the second o	
1				•		<u> </u>	<u> </u>	·		
1				1 1	1 1	F. Transpo	orter's Phone	•		
ı	9. Designated Facility Name and Site Address		O. US EPA ID Number	1_1_		G. State F	acility's ID			
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- 1	1-1." US DOT Description (including Proper Shipping	Name, Hazard Clas	s, and ID Number)	_	12. Con		13. Total	14. Unit	1 40 0 10 10 10 10 10 10 10 10 10 10 10 10	
1					No.	Туре	Quantity	Wt/Vol	I. Waste Number	
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1	Additional:Descriptions for Materials Listed Abov	e e salaman				K. Handlir	g Codes for Wastes	Listed Abo	ve	
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	15: Special Handling Instructions and Additional In	formation								
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1	# BILL TO EWRONWENTAL REC	OVERY STRUK	IES * USE PROPE	n mark	TY EQL	FAEM	田昭 別の業	1785年	43Watt	
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	16. GENERATOR'S CERTIFICATION: I hereby decident									
Ĭ.	marked, and labeled, and are in all respects in	proper condition to	transport by highway acco	ording to a	pplicable it	iternational	and national govern	nment regul	ations.	
1	•									
1	If I am a large quantity generator, I certify that									
	practicable and that I have selected the practic and the environment; OR, if I am a small quar	utily generator. I have	made a good faith effort	in minimiz	vanable io. re mv waste	me which in deneration	and select the best	waste man	agement method that is	
1	available to me and that I can afford.	, ,	* / #		A Jacob	Ū	•			
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-	19. Discrepancy Indication Space									
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1	20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.									
T	Printed/Typed Name		Signature					Mon	th Day Year	
Y			1					- I .		

DO NOT WRITE BELOW THIS LINE.

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-7550